

DAILY REPORT OF AIR TRAFFIC CONTROL FACILITY

For use of this form, see FM 1-303; the proponent agency is TRADOC.

LOCATION	TYPE OF FACILITY	CHIEF'S SIGNATURE	DATE	PAGE NO.
TIME (UTC)	REMARKS			
THE ENTRIES ABOVE ARE CORRECT; ALL SCHEDULED OPERATIONS HAVE BEEN ACCOMPLISHED, EXCEPT AS NOTED, AND ALL ABNORMAL OCCURRENCES AND CONDITIONS HAVE BEEN RECORDED.				
SHIFT SUPERVISOR'S SIGNATURE		SHIFT SUPERVISOR'S SIGNATURE		
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